PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

10/517252

| | : | CLAIMS A | C EU ED | | | | | | | | | |
|--|--|---|--|---|-------------------------|----------------------------------|------------|--------------------------------------|------------------------|----------------|--|------------------------|
| | CLAIMS AS FILED - PART I (Column 1) | | | | | | | SMALL ENTITY TYPE | | | OTHER THAN SMALL ENTITY | |
| U.S. NATIONAL STAGE FEES | | | · | | | | 7 | RATE | FEE |] : | RATE | FEE |
| BASIC FEE | | | SMALL ENT. = \$ 150 | | LARGE ENT. = \$ 300 | | 1 | BASIC FEE | 150 | OR | BASIC FEE | |
| EXAMINATION FEE | | | Satisfies PCT Article 33(1)- (4) = \$50/\$100 | | | her situations = 100 / \$ 200 | 1 | EXAM FEE | 200 | | EXAM FEE | |
| SEARCH FEE | | | U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400 | | | her situations = 250 / \$ 500 | | SEARCH FEE | 200 | | SEARCH FEE | |
| FEE FOR EXTRA SPEC, PGS. | | | minu | | / 50 = | | X \$ 125 = | | | X \$ 250 = | | |
| TOTAL CHARGEABLE CLAIMS | | | // min | • | |] | X \$ 25 = | | OR | X \$ 50 = | | |
| NDE | PENDENT CLA | IMS | 3 m | • | |] | X \$ 100 = | | OR | X \$ 200 = | | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | -,2 | | +\$180= | 180 | OR | + \$ 360 = | |
| If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | TOTAL | 630 | OR | TOTAL | |
| AMENDMENT A | 12804 Total | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | Minus Minus | (Colum HIGHE NUMB PREVIO PAID F | nn 2) EST USER USLY FOR | (Column 3) PRESENT EXTRA | | SMALL E RATE X \$ 25 = X \$ 100 = | ADDI- TIONAL FEE | OR OR OR | OTHER SMALL E RATE X \$ 50 = X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 180 = | 4 | OR | + \$ 360 = | |
| | | | | | | | | TOTAL ADDIT. | / | OR | TOTAL ADDIT. FEE | |
| | | (Calumn 1) | | (Colum | _ | (Column 3) | | · | | | | , |
| ENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUMB PREVIOL PAID F | ER USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | · | Minus | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | |
| AMENDA | Independent | | Minus | *** | | 3 | | X \$ 100 = | | OR | X \$ 200 = | |
| Ī | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | 11 | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

^{*} If the entry in column 1 is less than the entry in column 2, write "O" in column 3.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than "J. enter "J.